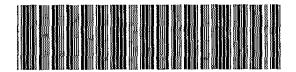
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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE DIVISION OF THE PROPERTY OF



## **COVER LETTER**

TO: Registration Sec Division of Cor			
SUBJECT: Andres	Painting & More (Name of Limite)	d Liability Company)	-
	15.4	T 10 10 00 -	
	Organization and fee(s) are so condence concerning this matter	-	
•	_	er to the following.	
Andres Ave	endano Gutierrez	Name of Person)	_ <del></del>
Andres Pai	nting & More		,
		(Firm/Company)	<u> </u>
50 SE 12th	n Street Apt 165		
		(Address)	<u></u>
Boca Rato	n,FL 33432		
	(City	//State and Zip Code)	C
For further information of	concerning this matter, please	call:	SECRETARY OF STATE OF CORPORATIONS
Andres Avendand	Gutierrez	at (561 ) 929-5045	FTAR FOF C
(Name	of Person)	(Area Code & Daytime Telephone Number)	CREAL CREAL
Enclosed is a check fo	r the following amount:		STATI
☐ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy is en	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na The name of the I	me: Limited Liability Comp	pany is:		
Andres Painting 8				
Must end with the wor	ds "Limited Liability Compan	y, "Limited Company" or their abbreviation "LLC," or	"L.C.,")	
ARTICLE II - A The mailing addre		of the principal office of the Limited Liabil	lity Company	is:
Principal Office	Address:	Mailing Address:		
50 SE 12th Street Ap	t 165	50 SE 12th Street Apt 165		
Boca Raton,FL 33432		Boca Raton,FL 33432		
(The Limited Liability of business entity with an	Company cannot serve as its on active Florida registration.)	gistered Office, & Registered Agent's Si own Registered Agent. You must designate an individual of the registered agent are:		SECRETARY OF LOR
	7134700 71101700170 00	Name	<u> </u>	25°.
	50 SE 12th Street A	unt 165	22.	ATE ATE
		street address (P.O. Box NOT acceptable)	8	ž.
	Boca Raton	FL 33432		
		y, State, and Zip		•
liability comp registered agent	any at the place design and agree to act in this	and to accept service of process for the abouted in this certificate, I hereby accept the acceptathe acceptathe in this certificate is a capacity. I further agree to comply with the aplete performance of my duties, and I am for	ppointment as e provisions of	all

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:		
"MGR" = Manager			
"MGRM" = Managi	ng Member		
MGR	Andres Avendano Gutierrez		
<u> </u>	50 SE 12th Street Apt 165	•	
	Boca Raton,FL 33432		
MGRM	Ana Micolta Cortes		
	50 SE 12th Street Apt 165	-	
	Boca Raton,FL 33432	•	
		•	
		_	
		-	
		-	
		-	
		-	
(Use attachment if n	enecom)		
(OSC attachment if it	cccssary)		
RTICLE V: Effective date	e, if other than the date of filing: (OPTIO	NAL)	
	, the date must be specific and cannot be more than five business		
o or 90 days after the date		anda brior	
	<b></b>		
		~ □	
REQUIRED SIGN	ATURE:	IVISION OF THE	2
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			ñ Za
	MANNEY .	7	ź-
Si	gnature of a member or an authorized representative of a member.		<u>ა</u> ლ
(I)	accordance with section 608.408(3), Florida Statutes, the execution	PM 12: 38	r
of	this document constitutes an affirmation under the penalties of perjury	_ <u>N</u> ≥	TAT
	that the facts stated herein are true.)	မ္က မွာ	, T
	Andres Avendano Gutiennez.	.,,	
_	Typed or printed name of signee		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)